http://allnurses.com/general-nursing-discussion/whats-your-best-108202.html

[1]

The best I have heard is from a nurse who said that one night she was floated to oncology at the hospital she used to work at. She was given a patient who was passing away and had been unconscious for several days. At one point during the night the nurse went into the room and the patient was at the top of the bed and looked at her and said, "don't let them take me!", the nurse was freaked out and asked her who was going to take her and she said that black thing up there and pointed up in the air. This patient died within minutes.

[2]

One night I was caring for a dying male patient. He was scared and I spent quite some time with him, trying to calm and reassure him. Eventually he calmed and I left the bedside and went over to the nurses station which was about 15 feet away. As I sat down I glanced over to him and there was a black shape standing over the bed, looking down at the patient. I was terrified, and am sure it was something evil.

I used to work in and old labor and delivery unit. It was a small hospital, so often times I was back there by myself. I liked to keep the lights low and things quite back there, so naturally I heard a lot of creeps and groans. There was a whole back hall unused, there was also no access to it accept by passing me. I could hears metal objects clanging, and doors shutting. Sounded like somebody was getting ready for a c section. I could always sense something there with me it seemed. There was also a back room on the med surg floor that was never used. It was a patient room converted to a storage room. That room was strange... Call light always going off, and nobody near it... Whole hospital had a creepy aura... Maybe it was the cemetary next door.. If that in itself is not strange....

[4]

I used to work in a state inst for developmentally disabled. We were temp relocated to another building for remodeling of our bldg. Anyways...I was working one nite, 2nd shift. We had a locked pica unit. I saw one of the residents walking down the hall. Very distinct gait and very distinct yellow t-shirt w/ a happy face on it. I went into the ward to let staff know that they had an escapee.

This was a serious situation because this particular resident, Larry, would ingest absolutely anything (from clothing to pens to belts to *ugh* a bird's head)...literally anything. He was also very reluctant to go back to his home ward (hence why I didn't bring him back myself...he needed two escorts). When we got back into the hall, less than 15 secs later, Larry was gone!!

We searched the entire building! Outside, downstairs, all wards...he was NO WHERE to be found!!! This whole search lasted last than 10 mins because I had all extra staff looking for him. I was just about to call the house supervisor to let her know that we "lost" someone when out from the bathroom walks Larry w/ one of the staff.

He had been getting his bath in the bathroom for the last 30 mins or so. Kind of freaky! I absolutely, without a doubt, saw Larry in the hallway. I never would've short-staffed the wards like I did if I hadn't seen him! Like I said, very distinctive gait, look, clothing. I took a lot of razzing that nite! They all thought that I was crazy.

Anyways, come to find out the next day, after the story goes around that I am crazy (haha, gigglegiggle, funnyfunny).....Larry had an identical twin brother who died in that building 10 yrs previously.

[5]

I work in a ltc facility and we have had numerous reports from pts that they have seen a little boy. This boy comes in their rooms, turns their call lights on and off, throw things on the floor. This facility used to be an orphanage!! Also there are stories of a oldfashioned nurse in the whole white dress and hat, would be seen going down the hall late at night doing her bed check and would go into someones room and stay there for a couple minutes if they were really sick or about to die. Well I guess one aide seen her awhile back and refused to go down that hall for a week, the persons room she went in just came back from the hospital still

really sick.

[6]

We have a white figure that has been seen in the medicine room, sometimes the carts are moved down the hall while you are in a room giving meds, etc. One of the male CNAs reported seeing a very tall black figure going from room to room several times. We have all seen balls of light floating around. From what we have been able to gather from old pictures of the property that the nursing home is on there was a mobile home park at one end and a cemetary at the other end of the building. Everyone has seen a little boy walking around but the freakiest part was when they saw wet childrens foot prints coming down the hall and followed them to the wall and there were footprints in the snow outside that came right to that place in the wall.

[7]

I know several. I'll share more later if there is any interest:

We had a black girl, about 10 in ICU that was severely injured in a car accident. Lots of brain damage. She didn't die there but was moved to another facility after weeks and weeks.

After that, I know of 3 older black males, in their 50's, that, if they were even mildly sedated, would ask about the little black girl with the ribbon in her hair who was sitting at the foot of their beds.

One guy said, "she asked me how I was doing, and then got up and walked that way" while he was pointing towards the 2nd floor window. He paused, a wide-eyed look came over his face, and then he said, 'But I guess she really couldn't have left the room that way, huh?"

Personally, I think she was taking care of grandfatherly figures.

I worked in an ICU where a prisoner convicted of murder died in ICU 1 - and nobody would put a patient in that room after that cause the air was too heavy and the room was too spooky and 'dark'. It was so bad (nurses would refuse to put patients in the room even if it was the last available bed; they'd triage out a patient before they'd trust putting a patient in that bed 1), that the hospital eventually closed down the room and knocked out a wall to make it a separate entrance into the unit.

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Lused to collect ahost stories: I know several.

[8]

You guys are freaking me out!! The only thing I've seen is pretty tame. I went in to set up a room for a new patient. I turned off the screensaver on the monitor, and it was showing a resp rate of 6,

big, deep breaths, then shallow ones - like cheyne stokes. I thought maybe the leads were swinging on the floor, but they were curled up on the shelf without any electrodes on them, like they always are. It wasn't picking up telemetry, because our tele only transmits cardiac rhythms. The pattern didn't stop until we put the new patient on the monitor. Never saw it again. I've never seen any ghosts or other stuff, though. I'd probably pee myself.

[9]

I was working in the nicu when we had a threat of a tornado. Some Nurses got pulled to go to a sister hospital in town to assist in the disaster plan. When all was over one of the nurses returned with this story: She was assissting the nurses in giving some meds before pulling all into the hallways. Every pt she went to said they already had their meds from that nice nurse in the white uniform and hat. She realized after she left that its been awhile since a nurse has worn a hat. That story revealed the urban ledgen of Nurse Betty.

Story goes she had an affair with a married md, became pregnant then agreed to allow him to perform an abortion on her on the 2nd floor OR room. She died and he went to jail. She never left the hospital and was seen frequently. The local newspaper would do an article of her every year around halloween on her sightings. The hospital has since been replaced with college dorms. Hmmmm i wonder if any students have seen her?

[10]

Heard a story once about a 5th floor neuro unit. This was told to me first person. Nurse was at the desk, and a guy in white nursing garb came through the double doors, walked into an empty room, and didn't come back out.

Nurse thought it was weird, so he went into the room, and it was empty.

He went to the double doors and opened them. There were 2 resp techs talking at the entrance who swore they'd been there talking the whole time, and that nobody came through the doors.

When one of his co-workers returned from lunch, and he explained what happened, she was like, "Oh, that's just Bob (actually I don't remember the name, so the name were changed to protect my ignorance). He worked here as an LVN years ago and was accused of molesting a child. He was sure he was about to be arrested so he jumped out the window in that room and killed himself. We see him all the time . . ."

[11]

The story of "Rocking Mary."

We closed room 12 in our MICU because just about every patient

that has been there since Mary died complains of seeing a woman in wearing a white habit rocking back and forth by their bedside. Apparently this nun never makes eye contact...just stares outside the window which happens to be on the patient left side over their head. This window overlooks the hospital cemetery where nuns that have died where buried. Mary was a nun that died of a car accident outside the hospital back in the 50's. She was only about 30 years old and all patient describes her as a young woman. We all thought that it was the "sun-down syndrome." Anyways, since then room 12 became our storage room where no one goes in by themselves unless it is absolutely critical.

[12]

We had a patient, chronic CHFer, always on the call button, hated being on fluid restrictions. you know the type: the nurses have to take turns during the shift answering the call button so the primary can actually do other work.

And this was a frequent flier cause he was very chronic, very borderline, and the hospital was the only place he wouldn't fluid overload.

I work 7p-7a. He died about 8pm. Oh the look on his face, like, "how could you let me die!" - Like it was our fault.

Anyway, family came and gone by 9pm, funeral home gone at 930pm.

About 10pm, the call button starts going off. I was there - call button going off every 5 minutes.

One of the nurses was a very spiritual girl. At about 2am, after like 4 HOURS OF THIS, nurse Mary snaps, 'Enough!'

She walks down to the room, and, practically screams into the empty room, "Mr X, you have died. You can't be in here bothering us anymore. Move along. In the name of Jesus, I'm exorcising you from this plane of existence. Go to the light and be happy!"

And I kid you not, the call button stopped going off then and there.

[13]

I work in a 9 bed ccu that we night shift nurses swear is haunted!! I personally have seen figures standing in doorways late at night. Blinds in pt's windows go up by themselves, callbells come on when room is unoccupied. One night, another nurse and myself were giving a bath when the tv starting flipping through all the channels. The remote for the tv was behind her on a stand.

Another time she was giving a bath by herself to a t/v, sedated and restrained pt. She was down on her haunches tying his restraint when she felt someone or something run their fingers through her hair. The pt was on 100mcg/kg of diprivan so it was not him and there was not anyone with her in the room.

The scariest one is one night we admitted a pt into room 9. After we had gottn her into bed, she looked at the wall in front of her and asked what was on the wall. We looked and here was bright red blood running down the wall. Needless to say we checked ourselves, the pt and the er personnel had not left the floor and no one had a fresh cut or open area on them. Well, the week before a young lady had died in that room. She came in to the hospital c/o abd pain. She ended having a upper endo and perfed someting. She had projectile vomited blood all over that wall and floor. It was horrible, the nurses on that night said it looked like a slaughterhouse.

I still get chills just thinking about it!!!

[14]

Not a spooky story, but a lonely ghost.

One of the rooms, if it was being used regularly, fine. no problems. But, since it was a room at the end of the hall, it was used for 'storage' lots of times.

If a couple of weeks went by and there were no patients/activity in the room, the call light would start going off, 4-5 times a shift. But. If you went into the room and turned on the TV, the call light wouldn't go off anymore. So, needless to say, when the room was being used for storage, the tv was always on w/ the volume down low.

[15]

Don't know if this qualifies as a ghost story but here it is. I was taking care of a 12 year old with aplastic anemia. A week before she die, every day, at 12:15PM I would get a cold chill across the back of my neck and the hair would stand up. I mentioned it to the evening nurse, who was convinced she would die at that time. Several days later, her parents decided to cease all treatment. She lasped into a coma. At 12Noon, she woke, asked me to hold her up, said goodbye to her parents, grandparents and siblings. And die in my arms. It was 12:15PM.

[16]

I was working in ICU before going to CRNA school. We had a male patient come in with an MI, he was admitted to room 15. He ended up having a carotid endartarectomy and eventually a CABG in about a week and a half. His CABG did not go well at all. He ended up with a coagulopathy and ended up bleeding and bleeding and dying...cardiovascular collapse. Anyway. A week later his brother was admitted to the hospital for an MI. He was admitted to room 14. We were able to do bedside EKGs from our monitors. Upon admission to the ICU we did our standard admission EKG...the name on the EKG came up being his dead brothers name, despite the admission information in the

computer being accurately entered as the brother's name admitted that night.

[17]

This isn't really a ghost story, but it definitely gave me chills.

I was working in a critical care unit and there was a minister that was a pt. I can't really remember what was wrong with him but I do remember him saying that we better get his family because he would be "going home soon". In the course of the next hour, he was made a DNR.

I promise you, after that man died, he had a GLOW coming from his face and a smile that was so sweet.....I have never seen anything like it. Nurses from all over the unit came to see this man's face and everyone that saw it, cried. To this day, I get tears in my eyes thinking of it. I can not think of any other word to describe it but "heavenly".

[18]

Prior to becoming a nurse, I was a paramedic. One patient all the way to the hospital told me about all the spirits in the ambulance and said that it looks like many people have died in here. She sat up, yelped, said OH GOD grabbed her chest and died as we pulled into the ER parking spot. We did CPR on the way in and she was pronounced by the ER doc after doing CPR for at least 10 mins.

[19]

We had a resident that had been hollering staff members names and banging on the wall instead of using her call light the night she passed away I had helped clean her up and then went to empty the soiled linen cart as I was emptying the cart I heard her scream my name and I ran out of the soiled linen room and did not go back in there alone.

[20]

I worked my way through nursing school as a housekeeper/security. One time the other man on security got a call from the nurses in the LTC floor of the hospital. They said they needed help because there was a ghost. Like the night housekeeper is going to be able to help you. So he asked her what kind of ghost it was. She wasn't sure what he meant. He asked her if she could see through it. She said yes. He said then it can't grab you, so don't worry about it. Now if you can't see through it, maybe there is something I can do.

The nurses weren't amused, but I think it is funny.

[21]

I was on break outside in a gazebo at a LTC facility with a CNA. The CNA pointed out a black cat on the roof of the facility and said, "Everytime that cat shows up on the roof, someone who's bed is near the cat...dies". Sure enough, later that shift, the lady who's room was under the cat did die. I told my teenage daughter about this, and it kind of gave her chills. We were looking out of our window and our own black cat jumped on the pickup truck and from there up to our roof. THAT gave both of us chills.

About twenty years ago, in a different LTC facility (before I was a nurse) I was going to assist the night nurse with vital signs. I told here I saw something white "floating" down the hall. She said it may have been a resident walking, I said "no, it was floating". About the area where I saw this, we had a linen cart covered with white and I assumed maybe that is really what I had seen. The first room we went into, of course, was near the "spot". As I was putting the BP cuff on the resident, the nurse said "never mind". I didn't get it, and continued to put on the cuff when the nurse said "she's dead, and I believe you saw her soul leaving". Well, being easily spooked, that job didn't last much longer.

[22]

A couple, retired military captain and his wife, Margaret, sold their house to move to Florida. It so happens that they sold their house to the State - the state was going to use it as a resident home for mentally disabled teens.

After the closing, but before they moved, Margaret died in the house. The Captain had to move cause the house was already sold.

Do you know where I'm going with this??

Residents always referred to 'old lady' that they always saw. Nursing staff just referred to her as 'Maggie'.

Now, late at night, when the residents were asleep, if the staff put the TV on more adult programming, like 'Red Shoe Diaries', etc., the TV would turn off, and when turned back on, would come on on a different channel.

There was this one nurse, it was like the house was out to get her. She'd swear that 'the carpet tripped me'. When cupboards opened, knives would fall out aimed at her. Turns out this nurse was eventually fired for abusing and stealing from the residents.

Maggie takes care of her 'children'.

This was represented to me as a true and ongoing story.

I haven't even taken boards yet and I already have a story!

I work as a CNA in long term care. We had one resident "Betty" who was totally independant, all ADL's were done on her own and she did fine on her own, never had an incident. The only time she wanted help was showers and then she only wanted you around to make sure she didn't slip and fall. Betty came down with pneumonia and had to be hospitalized. When she came back she was too weak to do things on her own but too stubborn to ask for help. The last thing the CNA told her before going to bed was "If you want to get up, hit your call light. I'll come help you." Of course she didn't, got rid of the bed alarm, climed out of bed and fell. Betty died from the fall. No one has been moved into her bed.

The following week the call light for the room went off at night. Thinking it was the resident in bed B I walked down the room to see what she wanted. I walked into the room only to see the call light for bed B and A off, the call light for bed C (Betty's unoccupied bed) was on. My eyes filled up with tears, I backed out of the room and made someone else turn the call light off.

[24]

An agency nurse asked us if we would not laugh at her if she told us something weird and everyone told her that they wouldn't. She said that she walked out of a room from starting an IV line and saw a black figure going down the hallway, that same morning in six hours three residents died, coincidence?

[25]

Here's a few stories...

A friend of mine who is also a nurse used to work in hospice. She told me about a patient that she cared for that was a very mean individual who was hateful to her family as well as the nurses who cared for her. As this woman was dying, she became very afraid and started yelling that she was burning! She screamed & wailed about burning right up until she died.

I used to work in an old hospital built in the 1930's. I worked on a med-surg unit. In room 7, the beds used to raise up & down by themselves. We called maintenance, who checked the beds out & said they were fine. While the beds were in the hall, they didn't move. Once they went back into room 7, they started moving again.

Our old facility has closed down and we have since moved into a new hospital. There is some rumor that the land was once a cemetary. The night before we moved into the new hospital, the fire alarms went off & it was discovered that the burners were turned on in the kitchen. No one had been in the kitchen that day. The first week of staying at the hospital, one patient said her window kept swinging open. The handle to open the window is difficult to turn & the patient was unable to get out of bed. There is a pet Cemetary nearby. Several patients have reported seeing cats & dogs in their rooms. Even my grandfather stayed there for a week & kept saying there was a big yellow cat in the corner.

[26]

This one is pretty creepy and it is one of the reasons I got out of the hospital and started working office case management.

I worked many years on tele and I worked steady nights. I was constantly overtired, never felt quite rested. While waiting for my husband to get home (he worked steady 2nd shift, I worked steady nights) I was dozing on the couch, the kids were in bed. I was half in and out of consciousness when I felt a presence. Even though my eyes were closed tight, I "felt" the room turn red beyond my eyelilds. I started to hear the whispers of athousand souls in the room. The air was oppressive, and I tried to scream, though no sound came out. The whispers got louder and louder, though I could not tell what the souls were trying to say. When my husbands key turned in the door, the redness in the room vanished, the whispers instantly stopped, and I became wide awake, as though never asleep.

I told my husband I felt it would be a bad night. Sure enough, in the room across the hall from the nurses station (you know the one, that is reserved for the sickest or the most unstable, so to be close when code is called) my coworkers patient strangled herself silently in her waist restraint. Her body was contorted, limbs contorted in unnatural ways, with her face smashed between the bedrail and the mattress.

My coworker was distraught, having checked on her only 20 minutes prior. We called a code, and worked on her a back breaking 30 minutes, I did compressions, and I still remember the sound of a couple fo ribs cracking. In the end she was gone, and my coworker was beside herself.

The next night the same scenario, I waited for my husband to come home, I drifted in and out of consciousness, the room turned red beyond my eyelids. and a thousand souls whispered tortured sounds into my ears, but I was unable to discern what they were saying. I opened my mouth to scream, nothing came out, I woke to the sound of the key in the door...That night I had agreed to switch sides with my coworker, having felt pity for her. The room across the hall was cleaned and in it was a new patient, a man in his 50's with moving chest pain...I was tired from the night before, my back still sore from the 30 minutes of doing compressions.

I worked swiftly as I could getting in first rounds, checking frequently on my new friend across the hall with the moving chest pain. I was newly trained in telemetry, and felt concerned about the pain that moved across his chest, and down the left arm, then back up and down the right arm.

Although I was new, I felt that I noted a subtle S-T depression on his rhythm strip. But a more seasoned tele nurse looked at the strip, and said it was nothing. I called the cardiologist, and though I didn't want to seem overly zealous, I told him about the moving chest pain, and what I felt to be a subtle change in the S-T segment. He ordered my patient maalox and tylenol, which I gave, then I was sidetracked by a patient whose rate suddenly went into the 150's. I got busy with his orders, and for a moment, forgot about my patient with the moving chest pain.

Suddenly the unit clerk shouted at me in the still of the night down the hall, "Patti, go see your patient in 15, he is in V Tach!, as I raced to his room, she said, "NO! now he is in V fib!" I yelled over my shoulder, call a code!

As I ran into his room, the hues changed from a soft yellow, to a definite red. I looked at my patient, as he sat up, and laid down, up and down up and down again and again, making these agonal sounds. He could not sit still. In the midst of this the code team came in. They all watched as this man sat up and laid down again and again. In awe, we watched as this man breathed his last earthly breath.

As he laid down for the last time, they sprang into action, but too late. He died of a massive heart attack. A week later I was applying to every insurance company in town. I got my steady daylight weekends and holidays off. I make sure I get 8 hours of uninterrupted sleep. I vow never to work nights again.

[27]

I was walking past the nurses station on one of our units just before breakfast time and saw this big black figure that was behind a chair raise up from about three feet tall to seven feet almost touching the ceiling and it was coming my way over the counter. I moved my butt on out there quickly, come to find out when I shared this story with the folks who had worked 11-7 the day before and one of them had seen a big black figure go by and they both heard it make some kind of mournful moan as it went down the ramp to the other unit. I nearly fell over when I found out I wasn't the only one seeing it that day. We both described exactly the same thing with even the same gait.

[28]

I used to work in an old catholic hospital. Where the labor and delivery unit is located now, it used to be the convent for the nuns that worked at this hospital. One of the nuns died of natural causes years ago. This nun loved and raised numerous varieties of roses. Ever since the OB department was moved to this area, anytime a mother or baby is having difficulties you can smell the scent of roses throughout the whole unit. The OB nurses know to be prepared when they start smelling the scent of roses. If a mother or baby dies, the room suddenly fills with rose petals. It is one of the creepiest, but also loving things that happens. I was standing in a room one night when the baby died. The room filled with white and pink rose petals. The nurses and family was creeped out.

I worked at another hospital where you would see a nurse in the old white dress and cap walk down the hallway and smile at you. Then she would walk into a patient's room and apply wrist restraints. All the nurses knew her. It was just Mildred who died 60 years ago. You just had to follow her so you can take the wrist restraints off.

I do have other stories that are a lot creepier than these.